

TITLE V BLOCK GRANT APPLICATION
FORMS (1-21)
STATE: VA
APPLICATION YEAR: 2005

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APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED 7/15/2004	APPLICANT IDENTIFIER VA04-071204-130-601-00760
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE	STATE APPLICATION IDENTIFIER
Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction		Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	
		4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER B04MC02415
5. APPLICANT INFORMATION			
Legal Name: Virginia Department of Health		Organizational Unit: Office of Family Health Services	
Address (give city, county, state and zip code) 109 Governor Street 7th Floor Richmond, VA 23219 County: NA		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: Janice M. Hicks, Ph.D. Tel Number: (804) 864-7662	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">5</div><div style="border: 1px solid black; padding: 2px 5px;">4</div><div style="border: 1px solid black; padding: 2px 5px;">6</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">1</div><div style="border: 1px solid black; padding: 2px 5px;">7</div><div style="border: 1px solid black; padding: 2px 5px;">7</div><div style="border: 1px solid black; padding: 2px 5px;">5</div></div>		7. TYPE OF APPLICANT: (Enter appropriate letter in box) A A. State H. Independent School District B. County I. State Controlled Institution of Higher Learning C. Municipality J. Private University D. Township K. Indian Tribe E. Interstate L. Individual F. Intermunicipality M. Profit Organization G. Special District N. Other (Specify)	
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration Decrease Duration Other (specify):		9 NAME OF FEDERAL AGENCY: Health Resources and Services Administration, Maternal and Child Health Bureau	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">3</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">4</div></div> TITLE: Maternal and Child Health Services Block Grant		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Maternal and Child Health Services Block Grant	
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): Statewide			
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:	
Start Date: 10/01/2004	Ending Date: 09/30/2005	a. Applicant 3rd	b. Project Statewide
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$ <u>13,001,114.00</u>	a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE: b. NO <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b. Applicant	\$ <u>0.00</u>		
c. State	\$ <u>11,598,037.00</u>		
d. Local	\$ <u>0.00</u>		
e. Other	\$ <u>0.00</u>		
f. Program Income	\$ <u>1,415,463.00</u>		
g. TOTAL	\$ <u>26,014,614.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT <input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.			
a. Typed Name of Authorized Representative David E. Suttle, M.D.		b. Title Director, Office of Family Health Services	c. Telephone Number (804) 864-7651
d. Signature of Authorized Representative		e. Date Signed	

FORM 2
MCH BUDGET DETAILS FOR FY 2005

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: VA

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])

Of the Federal Allocation (1 above), the amount earmarked for:

A.Preventive and primary care for children:

\$ 4,030,002 (31 %)

B.Children with special health care needs:

\$ 5,451,878 (41.93 %)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 0 (0 %)

(The above figure cannot be more than 10%)[Sec. 504(d)]

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 0

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 11,598,037

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$ 0

5. OTHER FUNDS (Item 15e of SF 424)

\$ 0

6. PROGRAM INCOME (Item 15f of SF 424)

\$ 1,415,463

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 8,718,003

\$ 13,013,500

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 26,014,614

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 100,000

c. CISS: \$ 100,000

d. Abstinence Education: \$ 859,320

e. Healthy Start: \$ 1,050,000

f. EMSC: \$ 0

g. WIC: \$ 72,465,440

h. AIDS: \$ 5,500,000

i. CDC: \$ 5,667,000

j. Education: \$ 0

k. Other: \$ 0

MCHB,DMAS \$ 921,695

TANF,EPA \$ 2,311,883

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$ 88,975,338

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 114,989,952

FORM NOTES FOR FORM 2
None
FIELD LEVEL NOTES
None

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506((a))(1-3)]

STATE: VA

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 12,976,921	\$ 11,973,488	\$ 13,478,067	\$ 0	\$ 13,001,114	\$ 0
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 11,598,037	\$ 11,598,037	\$ 11,598,037	\$ 0	\$ 11,598,037	\$ 0
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 1,036,690	\$ 1,089,484	\$ 1,102,862	\$ 0	\$ 1,415,463	\$ 0
7. Subtotal <i>(Line8, Form 2)</i>	\$ 25,611,648	\$ 24,661,009	\$ 26,178,966	\$ 0	\$ 26,014,614	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 98,190,288	\$ 89,583,516	\$ 91,014,954	\$ 0	\$ 88,975,338	\$ 0
9. Total <i>(Line11, Form 2)</i>	\$ 123,801,936	\$ 114,244,525	\$ 117,193,920	\$ 0	\$ 114,989,952	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506((a))(1-3)]

STATE: VA

	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 12,658,141	\$ 10,303,629	\$ 12,764,996	\$ 10,432,222	\$ 12,752,961	\$ 10,349,930
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 487,055	\$ 487,055	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds <i>(Line3, Form 2)</i>	\$ 11,598,037	\$ 11,598,037	\$ 11,598,037	\$ 11,598,037	\$ 11,598,037	\$ 11,598,037
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
6. Program Income <i>(Line6, Form 2)</i>	\$ 1,326,644	\$ 2,562,782	\$ 1,192,644	\$ 2,921,851	\$ 1,149,022	\$ 2,244,519
7. Subtotal <i>(Line8, Form 2)</i>	\$ 26,069,877	\$ 24,951,503	\$ 25,555,677	\$ 24,952,110	\$ 25,500,020	\$ 24,192,486
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 86,437,295	\$ 86,619,943	\$ 89,614,583	\$ 88,923,934	\$ 87,784,102	\$ 86,115,797
9. Total <i>(Line11, Form 2)</i>	\$ 112,507,172	\$ 111,571,446	\$ 115,170,260	\$ 113,876,044	\$ 113,284,122	\$ 110,308,283
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: FedAllocExpended
Row Name: Federal Allocation
Column Name: Expended
Year: 2002
Field Note:
State reductions/limitations were placed due to reductions in state revenues thus slowing the federal spending due to the required match. They have now released the spending and we are on track for spending our federal dollars.
2. **Section Number:** Main
Field Name: ProgramIncomeExpended
Row Name: Program Income
Column Name: Expended
Year: 2002
Field Note:
The year end adjustment of Auto ATV's allow the state to spend more of it's matching funds in order to preserve federal resources.

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: VA

	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 3,623,412	\$ 1,673,221	\$ 1,865,900	\$ 0	\$ 2,013,663	\$ 0
b. Infants < 1 year old	\$ 3,308,648	\$ 2,208,563	\$ 3,327,786	\$ 0	\$ 3,360,226	\$ 0
c. Children 1 to 22 years old	\$ 7,160,196	\$ 7,043,058	\$ 6,579,883	\$ 0	\$ 7,146,814	\$ 0
d. Children with Special Healthcare Needs	\$ 10,468,884	\$ 10,707,032	\$ 10,354,962	\$ 0	\$ 9,909,357	\$ 0
e. Others	\$ 1,050,508	\$ 3,029,135	\$ 4,050,435	\$ 0	\$ 3,584,554	\$ 0
f. Administration	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
g. SUBTOTAL	\$ 25,611,648	\$ 24,661,009	\$ 26,178,966	\$ 0	\$ 26,014,614	\$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 0		\$ 37,400		\$ 100,000	
d. Abstinence Education	\$ 828,619		\$ 859,030		\$ 859,320	
e. Healthy Start	\$ 1,050,000		\$ 1,099,200		\$ 1,050,000	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 79,492,234		\$ 72,465,440		\$ 72,465,440	
h. AIDS	\$ 6,600,000		\$ 6,500,000		\$ 5,500,000	
i. CDC	\$ 5,789,716		\$ 5,652,946		\$ 5,667,000	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
MCHB,DMAS	\$ 0		\$ 836,395		\$ 921,695	
TANF,EPA	\$ 0		\$ 3,464,543		\$ 2,311,883	
DMAS	\$ 797,750		\$ 0		\$ 0	
EPA	\$ 386,534		\$ 0		\$ 0	
MCHB	\$ 314,435		\$ 0		\$ 0	
TANF	\$ 2,831,000		\$ 0		\$ 0	
III. SUBTOTAL	\$ 98,190,288		\$ 91,014,954		\$ 88,975,338	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: VA

	FY 2000		FY 2001		FY 2002	
I. Federal-State MCH Block Grant Partnership	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
a. Pregnant Women	\$ 1,744,590	\$ 2,460,212	\$ 1,757,851	\$ 1,833,814	\$ 3,937,121	\$ 2,894,521
b. Infants < 1 year old	\$ 2,714,583	\$ 2,558,158	\$ 1,667,692	\$ 2,528,763	\$ 571,332	\$ 2,047,514
c. Children 1 to 22 years old	\$ 7,034,983	\$ 5,601,573	\$ 7,877,066	\$ 6,440,133	\$ 9,096,288	\$ 6,276,025
d. Children with Special Healthcare Needs	\$ 10,551,108	\$ 10,104,944	\$ 10,068,965	\$ 10,549,305	\$ 10,604,193	\$ 9,994,087
e. Others	\$ 4,024,613	\$ 4,226,616	\$ 4,184,103	\$ 3,600,095	\$ 1,291,086	\$ 3,518,960
f. Administration	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
g. SUBTOTAL	\$ 26,069,877	\$ 24,951,503	\$ 25,555,677	\$ 24,952,110	\$ 25,500,020	\$ 24,731,107
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 165,616	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 828,619		\$ 828,619		\$ 828,619	
e. Healthy Start	\$ 1,976,225		\$ 2,894,739		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 69,742,170		\$ 73,024,903		\$ 75,239,576	
h. AIDS	\$ 5,577,600		\$ 6,241,280		\$ 5,739,455	
i. CDC	\$ 1,239,503		\$ 1,153,000		\$ 1,227,225	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
BRFSS	\$ 0		\$ 0		\$ 115,404	
EPA	\$ 0		\$ 0		\$ 342,767	
Family Planning Title X	\$ 0		\$ 0		\$ 4,125,440	
DMAS Resource Mothers	\$ 0		\$ 447,750		\$ 0	
DMAS Teen Preg. Prev.	\$ 0		\$ 700,000		\$ 0	
EPA Lead Abatement	\$ 0		\$ 500,106		\$ 0	
Title X	\$ 0		\$ 3,724,186		\$ 0	
Title X, BRFSS, EPA	\$ 6,973,178		\$ 0		\$ 0	
III. SUBTOTAL	\$ 86,437,295		\$ 89,614,583		\$ 87,784,102	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2002
Field Note:
This amount is based on the visits. The budgeted amount is used from prior year information.
2. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2003
Field Note:
This amount is based on vists. The budgeted amount is used from prior year information.
3. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2002
Field Note:
This amount is based on the visits. The budgeted amount is used from prior year information.
4. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_0_1Expended
Row Name: Infants <1 year old
Column Name: Expended
Year: 2003
Field Note:
This amount is based on visits. The budgeted amount is used from prior year information.
5. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2002
Field Note:
This amount is based on the visits. The budgeted amount is used from prior year information.
6. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2002
Field Note:
This amount is based on the visits. The budgeted amount is used from prior year information.
7. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2003
Field Note:
This amount is based on visits. The budgeted amount is used from prior year information.

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: VA

TYPE OF SERVICE	FY 2003		FY 2004		FY 2005	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 20,145,038	\$ 18,447,605	\$ 19,315,182	\$ 0	\$ 19,296,379	\$ 0
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 324,187	\$ 348,321	\$ 402,603	\$ 0	\$ 665,587	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 1,460,591	\$ 2,384,967	\$ 2,407,053	\$ 0	\$ 2,202,971	\$ 0
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 3,681,832	\$ 3,480,116	\$ 4,054,128	\$ 0	\$ 3,849,677	\$ 0
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 25,611,648	\$ 24,661,009	\$ 26,178,966	\$ 0	\$ 26,014,614	\$ 0

FORM 5

STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: VA

TYPE OF SERVICE	FY 2000		FY 2001		FY 2002	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 19,769,886	\$ 18,608,723	\$ 19,803,464	\$ 18,387,508	\$ 19,765,013	\$ 19,357,492
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 534,040	\$ 515,923	\$ 495,228	\$ 461,298	\$ 506,677	\$ 334,736
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 2,208,597	\$ 2,596,544	\$ 1,878,987	\$ 2,692,514	\$ 1,400,844	\$ 2,749,100
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 3,557,354	\$ 3,230,313	\$ 3,377,998	\$ 3,410,790	\$ 3,827,486	\$ 3,289,780
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 26,069,877	\$ 24,951,503	\$ 25,555,677	\$ 24,952,110	\$ 25,500,020	\$ 25,731,108

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: EnablingExpended
Row Name: Enabling Services
Column Name: Expended
Year: 2002
Field Note:
The number of patients requiring these services has decreased for FY2002.
2. **Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2002
Field Note:
This number is based on population. The population for these services increased. When the budget was done, prior year information was used. However, if the population changed then the expenditures will differ.
3. **Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2003
Field Note:
This number is based on population. The population for these services increased. When the budget was done, prior year information was used. However, if the population changed then the expenditures will differ.
4. **Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2002
Field Note:
The need for this service decreased in FY2002.

FORM 6

NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED

Sect. 506(a)(2)(B)(iii)

STATE: VA

Total Births by Occurrence: 97,390

Reporting Year: 2002

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment(3)	
	No.	%			No.	%
Phenylketonuria	103,090	105.9	18	5	5	100
Congenital Hypothyroidism	103,090	105.9	1,646	34	34	100
Galactosemia	103,090	105.9	295	4	4	100
Sickle Cell Disease	103,090	105.9	59	51	51	100
Other Screening (Specify)						
Biotinidase Deficiency	103,090	105.9	30	1	1	100
Homocystinuria	103,090	105.9	25	0	0	
Congenital Adrenal Hyperplasia (CAH)	103,090	105.9	853	5	5	100
Maple Syrup Urine Disease (MSUD)	103,090	105.9	19	3	3	100

Screening Programs for Older Children & Women (Specify Tests by name)

- (1) Use occurrent births as denominator.
 (2) Report only those from resident births.
 (3) Use number of confirmed cases as denominator.

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: BirthOccurence
Row Name: Total Births By Occurence
Column Name: Total Births By Occurence
Year: 2005
Field Note:
Screening data include tests performed under contract for US military.
2. **Section Number:** Main
Field Name: Phenylketonuria_OneScreenNo
Row Name: Phenylketonuria
Column Name: Receiving at least one screen
Year: 2005
Field Note:
Data include tests performed under contract for US military.
3. **Section Number:** Main
Field Name: Congenital_OneScreenNo
Row Name: Congenital
Column Name: Receiving at least one screen
Year: 2005
Field Note:
Data include tests performed under contract for US military.
4. **Section Number:** Main
Field Name: Galactosemia_OneScreenNo
Row Name: Galactosemia
Column Name: Receiving at least one screen
Year: 2005
Field Note:
Data include tests performed under contract for US military.
5. **Section Number:** Main
Field Name: SickleCellDisease_OneScreenNo
Row Name: SickleCellDisease
Column Name: Receiving at least one screen
Year: 2005
Field Note:
Data include tests performed under contract for US military.
6. **Section Number:** Other Screening Types
Field Name: Other
Row Name: All Rows
Column Name: All Columns
Year: 2005
Field Note:
Data include tests performed under contract for U.S. military.

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: VA

Reporting Year: 2002

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	8,412	38.2	0.0	2.6	54.6	4.6
Infants < 1 year old	99,235	21.1	0.0	68.5	5.6	4.7
Children 1 to 22 years old	54,995	28.3	0.4	2.8	55.7	12.9
Children with Special Healthcare Needs	7,349	47.0	3.0	43.0	7.0	0.0
Others	40,978	8.7	0.0	4.2	71.1	16.0
TOTAL	210,969					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: PregWomen_TS
Row Name: Pregnant Women
Column Name: Title V Total Served
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION). Includes pregnant women 22 years and older.
2. **Section Number:** Main
Field Name: Children_0_1_TS
Row Name: Infants <1 year of age
Column Name: Title V Total Served
Year: 2005
Field Note:
Data Source: CY 2002 Live births - Virginia Center for Health Statistics
3. **Section Number:** Main
Field Name: Children_1_22_TS
Row Name: Children 1 to 22 years of age
Column Name: Title V Total Served
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION). Includes pregnant teens 21 years and younger.
4. **Section Number:** Main
Field Name: CSHCN_TS
Row Name: Children with Special Health Care Needs
Column Name: Title V Total Served
Year: 2005
Field Note:
Data Source: VDH Patient Management System (Vision)
5. **Section Number:** Main
Field Name: AllOthers_TS
Row Name: Others
Column Name: Title V Total Served
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION).

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE
XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: VA

Reporting Year: 2002

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	99,235	68,534	21,834	123	5,930	21	2,669	124
Title V Served	13,703	6,790	3,589	99	408	2	0	2,815
Eligible for Title XIX	20,952	11,646	8,302	25	550	4	404	21
INFANTS								
Total Infants in State	99,235	68,534	21,834	123	5,930	21	2,669	124
Title V Served	99,235	68,534	21,834	123	5,930	21	2,669	124
Eligible for Title XIX	20,952	11,646	8,302	25	550	4	404	21

II. UNDUPLICATED COUNT BY ETHNICITY

				HISPANIC OR LATINO (Sub-categories by country or area of origin)				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	89,228	9,743	264	2,500	68	674	5,826	675
Title V Served	10,473	3,230						3,230
Eligible for Title XIX	18,190	2,714	48	656	8	125	1,760	165
INFANTS								
Total Infants in State	89,228	9,743	264	2,500	68	674	5,826	675
Title V Served	89,228	9,743	264	2,500	68	674	5,826	675
Eligible for Title XIX	18,190	2,714	48	656	8	125	1,760	165

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

1. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTotal_All
Row Name: Total Deliveries in State
Column Name: Total All Races
Year: 2005
Field Note:
Data Source: 2002 Resident Births, Virginia Health Statistics
2. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_All
Row Name: Title V Served
Column Name: Total All Races
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION) CY 2002.
3. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_White
Row Name: Title V Served
Column Name: White
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION) CY 2002.
4. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_Black
Row Name: Title V Served
Column Name: Black or African American
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION) CY 2002.
5. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_Indian
Row Name: Title V Served
Column Name: American Indian or Native American
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION) CY 2002.
6. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_Asian
Row Name: Title V Served
Column Name: Asian
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION) CY 2002.
7. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_Hawaiian
Row Name: Title V Served
Column Name: Native Hawaiian or Other Pacific Islander
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION) CY 2002.
8. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_More
Row Name: Title V Served
Column Name: More Than One Race Reported
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION) CY 2002.
9. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleV_RaceOther
Row Name: Title V Served
Column Name: Other and Unknown
Year: 2005
Field Note:
Data Source: VDH Patient Management System (VISION) CY 2002.
10. **Section Number:** I. Unduplicated Count By Race
Field Name: DeliveriesTitleXIX_All
Row Name: Eligible for Title XIX
Column Name: Total All Races
Year: 2005
Field Note:
Data Source: Virginia Health Statistics, 2002 Resident Births. Expected Payer recorded on birth certificates.
11. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTotal_All
Row Name: Total Infants in State
Column Name: Total All Races
Year: 2005
Field Note:
Data Source: Virginia Health Statistics, 2002 Resident Births.
12. **Section Number:** I. Unduplicated Count By Race
Field Name: InfantsTitleV_All
Row Name: Title V Served

Column Name: Total All Races

Year: 2005

Field Note:

Data Source: Virginia Health Statistics, 2002 Resident Births.

13. Section Number: I. Unduplicated Count By Race

Field Name: InfantsTitleXIX_All

Row Name: Eligible for Title XIX

Column Name: Total All Races

Year: 2005

Field Note:

Data Source: Virginia Health Statistics, 2002 Resident Births. Expected Payer recorded on Birth Certificate.

14. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTotal_TotalNotHispanic

Row Name: Total Deliveries in State

Column Name: Total Not Hispanic or Latino

Year: 2005

Field Note:

Data Source: Virginia Health Statistics, 2002 Resident Births.

15. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV_TotalNotHispanic

Row Name: Title V Served

Column Name: Total Not Hispanic or Latino

Year: 2005

Field Note:

Data Source: VDH Patient Management System (VISION) CY 2002.

16. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV_Mexican

Row Name: Title V Served

Column Name: Mexican

Year: 2005

Field Note:

Data not available

17. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV_Cuban

Row Name: Title V Served

Column Name: Cuban

Year: 2005

Field Note:

Data not available

18. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV_PuertoRican

Row Name: Title V Served

Column Name: Puerto Rican

Year: 2005

Field Note:

Data not available

19. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleV_CentralAmerican

Row Name: Title V Served

Column Name: Central and South American

Year: 2005

Field Note:

Data not available

20. Section Number: II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX_TotalNotHispanic

Row Name: Eligible for Title XIX

Column Name: Total Not Hispanic or Latino

Year: 2005

Field Note:

Data Source: Virginia Health Statistics, 2002 Resident Births. Expected Payer recorded on Birth Certificate.

21. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal_TotalNotHispanic

Row Name: Total Infants in State

Column Name: Total Not Hispanic or Latino

Year: 2005

Field Note:

Data Source: Virginia Health Statistics, 2002 Resident Births.

22. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleV_TotalNotHispanic

Row Name: Title V Served

Column Name: Total Not Hispanic or Latino

Year: 2005

Field Note:

Data Source: Virginia Health Statistics, 2002 Resident Births.

23. Section Number: II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX_TotalNotHispanic

Row Name: Eligible for Title XIX

Column Name: Total Not Hispanic or Latino

Year: 2005

Field Note:

Data Source: Virginia Health Statistics, 2002 Resident Births. Expected Payer recorded on Birth Certificate.

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: VA

	FY 2005	FY 2004	FY 2003	FY 2002	FY 2001
1. State MCH Toll-Free "Hotline" Telephone Number	(800) 230-6977	(800) 230-6977	(800) 230-6977	(800) 230-6977	(800) 230-6977
2. State MCH Toll-Free "Hotline" Name	Virginia's Statewide Human Services I & R System	Virginia's Statewide Human Services I & R System	Virginia's Statewide Human Services I & R System	Virginia's Statewide Human Services I & R System	Virginia's Statewide Human Services I & R System
3. Name of Contact Person for State MCH "Hotline"	Janice M. Hicks, Ph.D.	Janice M. Hicks, Ph.D.	Janice M. Hicks, Ph.D.	Janice M. Hicks, Ph.D.	Janice M. Hicks, Ph.D.
4. Contact Person's Telephone Number	(804) 864-7662	(804) 371-4125	(804) 371-4125	(804) 371-4125	(804) 371-4125
5. Number of calls received on the State MCH "Hotline" this reporting period			26,323	29,011	23,626

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: VA

	FY 2005	FY 2004	FY 2003	FY 2002	FY 2001
1. State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: calls_2
Row Name: Number of calls received On the State MCH Hotline This reporting period
Column Name: FY
Year: 2003
Field Note:
This is reported on a state fiscal year - 7/1/2002 - 6/30/2003

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2005
[SEC. 506(A)(1)]
STATE: VA

1. State MCH Administration:
(max 2500 characters)

The Virginia Department of Health is authorized by Section 32.1-77 of the Code of Virginia to administer the Maternal and Child Health Services Block Grant funds. Within the VDH, the Block Grant is managed by the Office of Family Health Services. The services provided with this funding include prevention and primary care services for pregnant women and mothers, prevention and primary care for infants, children and adolescents, and non-pregnant women of childbearing age. Services are also provided for children with special health care needs.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 13,001,114
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 11,598,037
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 0
7. Program Income (Line 6, Form 2)	\$ 1,415,463
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 26,014,614

9. Most significant providers receiving MCH funds:

35 District Health Departments
Regional Perinatal Councils
Universities: UVA, EVMS, VCU
Children's Hospital of the Kings Daughters, INOVA

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	8,412
b. Infants < 1 year old	99,235
c. Children 1 to 22 years old	54,995
d. CSHCN	7,349
e. Others	40,978

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:
(max 2500 characters)

* Maternity and Child Health clinical services are provided to low income women, infants, and children through agreements with the district/local health departments. Services include prenatal and postpartum care, laboratory testing, family planning, well-child care, and children's dental care, and prenatal genetics testing program.* The Resource Mothers Program provides intensive home visiting services during the prenatal months through the infant's first birthday. The program encourages early and regular prenatal care, positive health behaviors, maintaining school/job training attendance, delaying repeat pregnancies and involvement of the infant's father and grandparents. * The Care Connection for Children Program provides specialized medical-surgical and care coordination services for children with special health care needs.

b. Population-Based Services:
(max 2500 characters)

* The Newborn Screening Program, mandated by state law, screens all newborns for seven metabolic conditions and sickle cell disease. Follow-up and referral services are provided. Metabolic treatment clinics are held in several locations and special nutritional formulas are supplied. * The implementation of Universal Newborn Hearing Screening was effective July 1, 2000.* The Virginia Congenital Anomalies Reporting and Education System (VaCARES) utilizes information found in the birth and hospital discharge records for children ages birth to two to evaluate possible causes of birth defects, to improve the diagnosis and treatment of birth defects, and to inform parents of children identified as having birth defects and their physicians about available health, financial, social, and support resources.* The Division of WIC and Community Nutrition Services promotes healthy eating habits and good nutrition to improve the quality of life for pregnant women, infants, and children including children with special health care needs.

c. Infrastructure Building Services:
(max 2500 characters)

* Seven Regional Perinatal Councils (RPCs) are funded to address issues relating to care access, perinatal outreach education and the collection of fetal/infant mortality data at the local level. (In FY 03 the RPCs provided 1,721 professional education hours on more than 100 perinatal topics attended by over 14,124 health professionals.)* The State Child Fatality Review Team reviews child deaths in Virginia to learn about causes and circumstances in order to develop recommendations for prevention, education, and training to help reduce future child mortality.

12. The primary Title V Program contact person:

Name	Janice M. Hicks, Ph.D.
Title	Director, Policy and Assessment
Address	Office of Family Health ServicesVirginia Department of
City	Richmond
State	VA

13. The children with special health care needs (CSHCN) contact person:

Name	Nancy Bullock, RN, MPH
Title	Director, Children w/Special Health Care Needs Progra
Address	Division of Child and Adolescent HealthOffice of Family
City	Richmond
State	VA

Zip 23219
Phone (804) 864-7662
Fax (804) 864-7670
Email Janice.Hicks@vdh.virginia.gov
Web www.vahealth.org

Zip 23219
Phone (804) 864-7706
Fax (804) 864-7723
Email Nancy.Bullock@vdh.virginia.gov
Web www.vahealth.org

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

1. **Section Number:** Most significant providers receiving MCH funds
- Field Name:** ProviderFund3
- Row Name:**
- Column Name:**
- Year:** 2005
- Field Note:**
- UVA - University of Virginia
- EVMS - Eastern Virginia Medical School
- VCU - Virginia Commonwealth University

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: VA

PERFORMANCE MEASURE # 01

The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	100	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	
Numerator	95	62	87	103	
Denominator	95	62	87	103	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective					60
Annual Indicator				58.3	58.3
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	60	60	60	60	65
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective					60
Annual Indicator				54.5	54.5
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	60	60	60	60	65
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective					67
Annual Indicator				65.6	65.6
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	68	70	70	70	75
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective					82
Annual Indicator				80.1	80.1
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	82	83	85	85	88
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transition to all aspects of adult life. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective					5.8
Annual Indicator				5.8	5.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	5.8	6	7	8	10
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	85	90	75	77	79
Annual Indicator	80	70.7	74.9	72	
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	82	85	85	86	86
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	24	21.6	21	20	19
Annual Indicator	22.8	21.4	21.0	18.9	
Numerator	3,087	2,957	2,906	2,746	
Denominator	135,227	138,386	138,386	144,931	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	19	19	19	19	18
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	25	30	30	35	36
Annual Indicator	36	32	32	32	32
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	37	39	40	42	44
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	3.4	3.2	2.5	2.1	2.1
Annual Indicator	2.6	2.5	2.1	2.7	
Numerator	36	36	31	40	
Denominator	1,386,907	1,453,021	1,453,021	1,482,240	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	2.1	2.1	2.1	2.1	2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 11

Percentage of mothers who breastfeed their infants at hospital discharge.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	71	75	75	75	75
Annual Indicator	63.4	64.3	67	67	
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	78	78	79	80	80
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	55	85	95	98	100
Annual Indicator	37.1	84.5	95.1	97.2	
Numerator	34,649	81,736	91,849	94,206	
Denominator	93,289	96,759	96,535	96,870	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	8	7	7	6	5
Annual Indicator	10	10	7	4.9	
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	5	5	5	5	4.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 14

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	82	84	85	80	82
Annual Indicator	77.5	79.4	74.9	78.5	86.0
Numerator	363,307	360,927	357,100	367,315	407,845
Denominator	468,875	454,553	477,075	467,712	474,478
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	84	86	88	88	89
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 15

The percent of very low birth weight infants among all live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	1.5	1.5	1.4	1.4	1.3
Annual Indicator	1.6	1.6	1.7	1.7	
Numerator	1,525	1,618	1,650	1,653	
Denominator	95,207	98,864	98,531	99,235	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	1.3	1.3	1.3	1.3	1.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	10.4	9.8	9.2	8.6	5.8
Annual Indicator	9.6	9.5	7.6	5.8	
Numerator	46	46	37	29	
Denominator	477,142	484,065	484,065	499,862	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	5.8	5.8	5.4	5.4	5.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	85	87	89	90	90
Annual Indicator	80.7	86.6	85.4	85.8	
Numerator	1,230	1,401	1,362	1,418	
Denominator	1,525	1,618	1,595	1,653	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	90	90	91	91	91
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	85	86	87	88	89
Annual Indicator	84.7	84.6	84.9	84.7	
Numerator	80,609	83,633	83,619	84,085	
Denominator	95,207	98,864	98,531	99,235	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	90	90	91	91	91
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 2

The percent of children and adolescents who have a specific source of ongoing primary care for coordination of their preventive and episodic health care.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	86	90	82	80	80
Annual Indicator	75	75	75	75	
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	84	84	84	84	84
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 6

The unintentional injury hospitalization rate for children 1-14 per 100,000

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	171	167.5	145	142.5	140
Annual Indicator	159.6	147.8	142.7	114.4	
Numerator	2,067	2,011	1,941	1,580	
Denominator	1,295,444	1,360,313	1,360,313	1,381,105	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	137.5	135	132.5	130	130
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 7

The incidence of assault injuries hospitalizations among people aged 10-19.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	23.9	23.5	21.0	20	19
Annual Indicator	20.1	21.1	21.5	18.4	
Numerator	189	207	211	187	
Denominator	942,188	980,020	980,020	1,014,635	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	18	17	16	15	15
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 8

Rate of neural tube defects among live births in Virginia.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	5.6	5.0	5.0	5.0	5.0
Annual Indicator	3.8	6.5	3.0		
Numerator	36	64	30		
Denominator	95,243	98,864	98,531		
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	5.0	5.0	5	5	4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 9

Percent of children who are overweight or obese.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	15.2	17.4	17	17	16
Annual Indicator	15.2	17.4	17.4	17.4	17.4
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	15	14	14	14	14
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 10

The degree to which statewide data are available to monitor health-related behaviors among youth.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	0	0	6	6	6
Annual Indicator			6	6	6
Numerator			6	6	6
Denominator	16	16	16	16	16
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	10	10	10	10	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 11

Percent of newborns screened for hearing loss who receive recommended follow-up services.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	56	62	70	73	77
Annual Indicator	56.1	62.1	70.8	66.5	
Numerator	1,014	1,987	2,459	2,098	
Denominator	1,807	3,199	3,472	3,156	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	81	85	89	93	95
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 12

The percentage of women in Virginia's perinatal underserved areas receiving adequate prenatal care.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	75.1	75.0	76.7	77	77.5
Annual Indicator	75.6	75.8	88.7	88.6	
Numerator	15,362	15,914	15,731	15,860	
Denominator	20,322	20,987	17,744	17,906	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	78	78.5	79	80	80
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 13

The percentage of low birth weight births to African Americans in nine underserved areas.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	12.7	12.3	13.3	13.1	12.9
Annual Indicator	12.7	12.8	12.2	12.7	
Numerator	621	626	605	615	
Denominator	4,889	4,907	4,978	4,849	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	12.7	12.5	12.3	12.1	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 14

Percent of newborns screened for genetic diseases who receive recommended follow-up services.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	100	100	100	100	100
Annual Indicator	100.0	100.0	100.0	100.0	
Numerator	95	62	87	103	
Denominator	95	62	87	103	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	100	100	100	100	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

FORM NOTES FOR FORM 11

FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #1
Field Name: PM01
Row Name:
Column Name:
Year: 2005
Field Note:
Birth certificate data are not available for 2003 from the Center for Health Statistics.
2. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
3. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
4. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
5. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
6. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2005
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
7. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2005
Field Note:
National Immunization Program Data Calendar Year 2002 from CDC website
8. **Section Number:** Performance Measure #8
Field Name: PM08
Row Name:
Column Name:
Year: 2005
Field Note:
The 2003 birth data is not yet available from VA center for health statistics
9. **Section Number:** Performance Measure #9
Field Name: PM09
Row Name:
Column Name:
Year: 2005
Field Note:
Data Source: 1999 Statewide 10 Year Dental Needs Assessment. Statewide dental data not available until needs assessment completed again in 2009.
10. **Section Number:** Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2005
Field Note:
The 2003 injury death data file is not yet available from VA center for health statistics.
11. **Section Number:** Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2005
Field Note:
The data is collected based on an annual survey conducted by Ross Lab. The most recent data is from the 2002 survey. The numerator and denominator are not available for 2002 and 2003.
12. **Section Number:** Performance Measure #12
Field Name: PM12

Row Name:
Column Name:
Year: 2005

Field Note:

Data for 2002 are from the Virginia Early Hearing Detection and Intervention Program (numerator). The denominator is from the Virginia Center for Health Statistics (birth certificate data) and equals the number of infants born in Virginia hospitals. Data for 2003 are not available at this time.

13. Section Number: Performance Measure #13

Field Name: PM13

Row Name:

Column Name:

Year: 2005

Field Note:

Data are from the SLAITS-CSHCN survey for children under age 18 conducted between 10/2000 and 4/2002. SE +/- .44.

14. Section Number: Performance Measure #14

Field Name: PM14

Row Name:

Column Name:

Year: 2005

Field Note:

Numerator = Annual unduplicated recipients receiving a service from Department of Medical Assistance Services (DMAS) FY 2003 Statistical Record HCFA 2082 series

Denominator = Medicaid enrolled (eligibles from page 2-12 FY 2003 DMAS Statistical Record + estimated eligible not enrolled for Medicaid).

15. Section Number: Performance Measure #15

Field Name: PM15

Row Name:

Column Name:

Year: 2005

Field Note:

The 2003 birth data is not yet available from VA center for health statistics

16. Section Number: Performance Measure #16

Field Name: PM16

Row Name:

Column Name:

Year: 2005

Field Note:

The 2003 injury death data file is not yet available from VA center for health statistics.

17. Section Number: Performance Measure #17

Field Name: PM17

Row Name:

Column Name:

Year: 2005

Field Note:

The 2003 birth data is not yet available from VA center for health statistics

18. Section Number: Performance Measure #18

Field Name: PM18

Row Name:

Column Name:

Year: 2005

Field Note:

The 2003 birth data is not yet available from VA center for health statistics

19. Section Number: State Performance Measure #2

Field Name: SM2

Row Name:

Column Name:

Year: 2005

Field Note:

2002 Data are not available yet. Data cited from 2001 Virginia Children's Health Access Survey. Future data will be used from National Survey of Children's Health.

20. Section Number: State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2005

Field Note:

The 2003 Virginia hospital discharge data is not yet available.

21. Section Number: State Performance Measure #7

Field Name: SM7

Row Name:

Column Name:

Year: 2005

Field Note:

The 2003 Virginia hospital discharge data is not yet available.

22. Section Number: State Performance Measure #8

Field Name: SM8

Row Name:

Column Name:

Year: 2005

Field Note:

Data from Virginia Infant Tracking and Infant Screening System, Virginia CARES--birth defects registry.

23. Section Number: State Performance Measure #9

Field Name: SM9

Row Name:

Column Name:

Year: 2005

Field Note:

Data from fourth grade nutritional survey is not available for 2002 or 2003.

24. Section Number: State Performance Measure #11

Field Name: SM11

Row Name:

Column Name:

Year: 2005

Field Note:

Data are from the Virginia Early Hearing Detection and Intervention Program. Database transition occurred in May 2002 from TONE to Virginia Infant Screening and Infant Tracking System (VISITS).

25. Section Number: State Performance Measure #12

Field Name: SM12

Row Name:

Column Name:

Year: 2005

Field Note:

26. Section Number: State Performance Measure #13

Field Name: SM13

Row Name:

Column Name:

Year: 2005

Field Note:

No data available for 2003 until this summer.

27. Section Number: State Performance Measure #14

Field Name: SM14

Row Name:

Column Name:

Year: 2005

Field Note:

2003 data will not be available until later this year.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: VA

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	7.1	7	6.9	6.8	6.7
Annual Indicator	7.2	6.8	7.4	7.3	
Numerator	685	676	730	725	
Denominator	95,207	98,864	98,531	99,235	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	6.6	6.5	6.5	6.5	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

<u>Annual Objective and Performance Data</u>					
	1999	2000	2001	2002	2003
Annual Performance Objective	2.2	2.1	2	1.9	1.8
Annual Indicator	2.3	2.3	2.9	2.6	
Numerator	12.9	12.4	15.5	14.5	
Denominator	5.6	5.4	5.3	5.6	
Is the Data Provisional or Final?				Final	

<u>Annual Objective and Performance Data</u>					
	2004	2005	2006	2007	2008
Annual Performance Objective	1.7	1.6	1.6	1.6	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	5	4.9	4.8	4.7	4.6
Annual Indicator	5.0	4.7	4.8	5.1	
Numerator	474	469	477	505	
Denominator	95,207	98,864	98,531	99,235	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	4.5	4.4	4.4	4.4	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	2.3	2.3	2.2	2.2	2.2
Annual Indicator	2.2	2.5	2.6	2.2	
Numerator	211	251	253	220	
Denominator	95,207	98,864	98,531	99,235	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	2.1	2	2	2	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	7	6.9	6.9	6.2	6.2
Annual Indicator	6.9	6.2	6.2	6.9	
Numerator	655	614	614	686	
Denominator	95,485	99,478	98,531	99,235	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	6.2	6.2	6.2	6.2	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

	<u>Annual Objective and Performance Data</u>				
	1999	2000	2001	2002	2003
Annual Performance Objective	20	19	18	17	17
Annual Indicator	20.2	19.6	16.9	18.5	
Numerator	262	267	230	256	
Denominator	1,295,444	1,360,313	1,360,313	1,381,105	
Is the Data Provisional or Final?				Final	

	<u>Annual Objective and Performance Data</u>				
	2004	2005	2006	2007	2008
Annual Performance Objective	16	15	14	13	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

FORM NOTES FOR FORM 12

None

FIELD LEVEL NOTES

None

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: VA

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

2

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

2

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

2

4. Family members are involved in service training of CSHCN staff and providers.

2

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

1

6. Family members of diverse cultures are involved in all of the above activities.

1

Total Score: 10

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: VA FY: 2005

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women," and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Improve data systems, analysis and reporting capacity.
2. Reduce racial and ethnic minority disparities in health status.
3. Reduce childhood obesity.
4. Increase quality health services through promotion of standards of care, assessment of health outcomes and other infrastructure-based activities.
5. Improve access to quality health services through promotion of early enrollment in prenatal care, establishing medical homes, and enrollment in Medicaid/FAMIS.
6. Improve identification of at-risk populations and assure linkage with prevention, early intervention, and family support services.
7. Reduce mortality and morbidity from injury and violence.
8. Reduce dental disease among children and adolescents.
- 9.
- 10.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: VA

APPLICATION YEAR: 2005

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	General Systems Capacity Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Consultation on the options for improving financial/grant monitoring systems for Title V	Considering changes in Title V financial/grant monitoring system to improve data for reporting and planning	A state or states that have a newly implemented Title V financial/grant monitoring systems
2.	Data-related Issues - Data Systems Development If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Consultation on linking data such as birth/death records and Medicaid data	Linked data will provide a richer source of data for understanding the relationships between health outcomes and health delivery	A state MCH program that has successfully linked data systems
3.	Data-related Issues - Needs Assessment If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> N/A </u>	Consultation on the development of a PRAMS-like survey of new mothers	Data for better understanding such factors as intention, perinatal substance abuse, prenatal care, breastfeeding, etc.	A state that has implemented a RRAMS-like survey
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u> </u>			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this			

	issue pertains by entering the measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: VA

SP # 2

PERFORMANCE MEASURE:

The percent of children and adolescents who have a specific source of ongoing primary care for coordination of their preventive and episodic health care.

STATUS:

Active

GOAL

To assure access to primary care services

DEFINITION

Numerator:

Number of children aged 0-18 with a specific source of health care

Denominator:

Number of children aged 0-18 in the state

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Statewide telephone surveys to be conducted biennially. The 1996 survey asked, "Is there a particular clinic, hospital, doctor's office, or other place that [NAME] usually goes to for health care?" The 1999 and 2001 surveys asked the questions: "Is there a particular clinic, hospital, doctor's office or other place that [NAME] usually goes if he/she is SICK or you need advice about his/her health?" "Is there a particular clinic, hospital, doctor's office, or other place that [NAME] usually goes if she/he needs ROUTINE or PREVENTIVE care, such as a physical examination, well-baby visit or a check-up?" In addition, "Is this the same place where [NAME] usually goes when he/she is sick?"

SIGNIFICANCE

Access to clinical preventive services depends in part on access to an ongoing source of primary care. Increasing access to primary care can help to increase access to clinical preventive services for many of those most in need of these services. Ideally, access should be to a well-organized system of primary care, staffed by well-trained primary care providers, with established and well-functioning networks into the community. Studies have demonstrated that comprehensive public/private collaborative community efforts can reduce access barriers to primary care and increase use of preventive services. Several studies with discrete populations of underserved or uninsured individuals have demonstrated improved health outcomes and reduction in inappropriate use of emergency services following increased access to primary care.

SP # 6

PERFORMANCE MEASURE:

The unintentional injury hospitalization rate for children 1-14 per 100,000

STATUS:

Active

GOAL

To reduce the number of hospitalizations to children aged 1-14 caused by unintentional injuries.

DEFINITION

Numerator:

Number of hospitalizations to children aged 1-14 caused by unintentional injuries.

Denominator:

All children in Virginia aged 1-14.

Units: 100000 **Text:** Rate per 100,000

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Hospitalization Discharge Data.

SIGNIFICANCE

Injury is the leading cause of child hospitalization. In Virginia more than 2,500 children are hospitalized in a year with an average cost of \$6,000 per injury. It is estimated that 90% of these hospitalizations are preventable.

SP # <u>7</u>	
PERFORMANCE MEASURE:	The incidence of assault injuries hospitalizations among people aged 10-19.
STATUS:	Active
GOAL	To reduce the rate of assault injury hospitalizations to people aged 10-19.
DEFINITION	<p>Numerator: Number of hospitalizations to people aged 10-19 caused by assault.</p> <p>Denominator: All people aged 10-19 in Virginia .</p> <p>Units: 100000 Text: Rate per 100,000</p>
HEALTHY PEOPLE 2010 OBJECTIVE	
DATA SOURCES AND DATA ISSUES	Hospitalization Discharge Data
SIGNIFICANCE	Assault is a leading cause of hospitalization to people aged 10-19. Assault injury hospitalizations result in more than 10% of all injury hospitalizations to this age group and have an average charge of more than \$10,000 per injury hospitalization.

SP # 8

PERFORMANCE MEASURE:

Rate of neural tube defects among live births in Virginia.

STATUS:

Active

GOAL

Reduce the number of neural tube defects.

DEFINITION

Numerator:

Total number of live births with a diagnosed neural tube defect in the calendar year.

Denominator:

Total number of live births in the calendar year.

Units: 10000 **Text:** rate per 10,000

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

VaCARES registry, Virginia Vital Records

SIGNIFICANCE

Neural tube birth defects are a devastating birth defect that impacts negatively on families and society. The CDC estimates that 50% to 75% of neural tube birth defects can be prevented through preconceptional consumption of the vitamin, folic acid. Population-based education programs can increase awareness and consumption of folic acid as evidenced by the Southwest Virginia Perinatal Coordinating Council's education campaign. This performance measure supports the current Title V Needs Assessment.

SP # 9

PERFORMANCE MEASURE:

Percent of children who are overweight or obese.

STATUS:

Active

GOAL

Improve the nutritional status and physical activity level of children in Virginia.

DEFINITION

Numerator:

Number of 4th grade children in Virginia whose weight is equal to or greater than the 95th percentile based on Body Mass Index (BMI).

Denominator:

Total number of children in 4th grade in Virginia.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

State survey of 4th graders.

SIGNIFICANCE

Diet has been associated with 8 of the 10 leading causes of death in the U.S. Healthy behaviors during childhood reduce the potential for conditions in later life, such as diabetes, heart disease, cancer, obesity and osteoporosis. The average American consumes only 1 1/2 servings of calcium rich foods per day as compared to the recommended 3 to 4 servings for children and adolescents. 75% of children do not eat fruits and vegetables daily and 70% of Americans consume high levels of fat. Currently, one-third of adults are overweight with the prevalence among children rapidly increasing. A recent study in Virginia found that one-third of fourth grade students were overweight and had low physical activity levels. The study also found that the students had a good understanding of healthy nutrition behaviors but they do not make choices accordingly. Community efforts and support are needed to encourage children to make healthy choices related to nutrition and physical activity.

SP # 10

PERFORMANCE MEASURE:

The degree to which statewide data are available to monitor health-related behaviors among youth.

STATUS:

Active

GOAL

To monitor priority health risk behaviors among youth.

DEFINITION

This objective is measured by a scale, giving two points for each health-related behavior for which statewide data have been made available within the past two years and one point for each health-related behavior for which statewide data have been made available within the past three to five years. The behaviors to be monitored are (1) tobacco use, (2) alcohol use, (3) other drug use, (4) sexual behavior, (5) violence, (6) unintentional injury risk behavior, (7) physical activity, and (8) dietary behaviors.

Numerator:

None

Denominator:

None

Units: 16 **Text:** Scale

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

The Virginia Departments of Health, Education, and Mental Health, Mental Retardation and Substance Abuse Services.

SIGNIFICANCE

Health-risk behaviors, which contribute to the leading causes of mortality and morbidity among youth and adults, are often established in adolescence, extended into adulthood, and are interrelated and preventable. These behaviors include tobacco use, unhealthy dietary behaviors, inadequate physical activity, alcohol and other drug use; sexual behaviors that may result in HIV infection, other sexually transmitted diseases, and unintended pregnancies; and behaviors that may result in intentional injuries (violence and suicide) and unintentional injuries (motor vehicle crashes). Data are needed to set program goals and objectives and monitor the progress toward those goals that address youth risk behaviors.

SP # 11

PERFORMANCE MEASURE:

Percent of newborns screened for hearing loss who receive recommended follow-up services.

STATUS:

Active

GOAL

To reduce the morbidity associated with hearing impairment by ensuring that children are identified with this condition as early as possible receive needed treatment or other intervention.

DEFINITION

Numerator:

Number of infants whose newborn hearing screen warrants need for follow-up screening/diagnostic testing

Denominator:

Number of infants receiving at least one follow-up screen by 3 months of age

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Newborn Hearing Screening Program web-based data system, VISITS, and other follow-up data received by the NHSP from clinical evaluations

SIGNIFICANCE

Universal newborn hearing screening programs continue to expand across the nation. Early identification of deafness or hearing loss is a critical factor in preventing or ameliorating language delay or disorder in children who are deaf or hard of hearing, allowing appropriate intervention or rehabilitation to begin while the developing brain is ready. Early identification and intervention have lifelong implications for the child's understanding and use of language. Earliest possible identification of infant hearing loss has been endorsed widely as critical for the developing child as stated in HP2010

SP # 12

PERFORMANCE MEASURE:

The percentage of women in Virginia's perinatal underserved areas receiving adequate prenatal care.

STATUS:

Active

GOAL

Provide prenatal care to pregnant women in select perinatal underserved areas to reduce infant mortality and morbidity.

DEFINITION

Underserved localities are those identified as having underutilization of care in a periodic assessment conducted by DWIH. The criteria for "underutilization" and "underserved" are described in iPerinatal Underserved Areas in Virginia, 2002, along with the list of localities.

Numerator:

The numerator is the number of births to women who receive adequate or better care in perinatal underserved localities in a calendar year.

Denominator:

The denominator is the number of women giving birth in those same localities in the same year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

16-6

Increase the proportion of pregnant women who receive early and adequate prenatal care.

DATA SOURCES AND DATA ISSUES

Virginia Center for Health Statistics (Vital Records using Kotelchuck Index).

SIGNIFICANCE

Many of Virginia's localities have high rates of infant mortality and morbidity and are designated perinatal underserved in manpower and utilization. This performance measure is aimed at improving care with a resulting improvement in outcomes.

SP # 13

PERFORMANCE MEASURE:

The percentage of low birth weight births to African Americans in nine underserved areas.

STATUS:

Active

GOAL

Provide targeted services in select perinatal underserved areas to reduce the percentage of low weight births to African Americans, thereby reducing racial disparities.

DEFINITION

The nine underserved areas are those communities that have been or are Healthy Start sites.

Numerator:

The numerator is the number of low weight infants born to African Americans in nine localities.

Denominator:

The denominator is the number of births to African Americans in the same localities.

Units: 100 **Text:** 1

HEALTHY PEOPLE 2010 OBJECTIVE

16-10a
Reduce low birth weight.

DATA SOURCES AND DATA ISSUES

The data sources are the Virginia Center for Health Statistics and supplemental data collected by the Virginia Healthy Start Initiative.

SIGNIFICANCE

Many of Virginia's localities have high rates of infant mortality and morbidity and a high percentage of this population are African American. This performance measure is aimed at increasing the quality and quantity of care with a resulting improvement in outcomes among this population and reducing racial disparities.

SP # 14

PERFORMANCE MEASURE:

Percent of newborns screened for genetic diseases who receive recommended follow-up services.

STATUS:

Active

GOAL

To reduce the morbidity associated with inborn errors of chemistry (metabolic, endocrine, and hematologic disorders) by ensuring that children identified with these conditions receive needed treatment or other intervention.

DEFINITION

Numerator:

Number of infants with critical newborn screening results who received diagnosis and treatment by 6 months of age.

Denominator:

Number of infants with critical newborn screening results born in the calendar year.

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Newborn Screening Program web-based data system, VISITS and follow-up data received from clinical evaluations.

SIGNIFICANCE

HP 2010 reports nearly all States treat or refer for treatment infants with a confirmed diagnosis, yet some disorders are more uniformly screened for than others, and follow-up testing and early initiation of preventive treatment are uneven, it is vital that screening be universally available, that screening be of the highest quality, that diagnostic testing be provided for those newborns who screen positive, and that follow-up treatment be offered to children with diagnosed disorders.

FORM NOTES FOR FORM 16

None

FIELD LEVEL NOTES

None

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: VA

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	50.0	37.0	49.1	38.6	
Numerator	2,254	1,710	2,269	1,873	
Denominator	450,638	461,982	461,982	485,348	
Is the Data Provisional or Final?				Final	

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose ages less than one year during the reporting year who received at least one initial periodic screen.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	76.4	76.8	80.2	77.8	
Numerator	26,409	27,070	28,548	28,885	
Denominator	34,555	35,246	35,578	37,135	
Is the Data Provisional or Final?				Final	

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	27.9	55.4	54.1	72.1	
Numerator	143	683	1,025	991	
Denominator	513	1,232	1,896	1,374	
Is the Data Provisional or Final?				Final	

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	81.5	81.0	80.5	80.8	
Numerator	77,634	80,073	79,382	79,728	
Denominator	95,207	98,864	98,567	98,716	
Is the Data Provisional or Final?				Final	

HEALTH SYSTEMS CAPACITY MEASURE # 07

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	32.0	28.0	31.2	26.6	
Numerator	28,342	23,559	25,693	22,184	
Denominator	88,465	84,005	82,452	83,312	
Is the Data Provisional or Final?				Final	

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	<u>Annual Indicator Data</u>				
	1999	2000	2001	2002	2003
Annual Indicator	1.5	4.2	4.6	4.4	3.3
Numerator	255	700	804	775	571
Denominator	17,250	16,840	17,380	17,620	17,474
Is the Data Provisional or Final?				Final	Final

FORM NOTES FOR FORM 17

Data not available at current time for FY 03

FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2005
Field Note:
2002 Virginia Hospitals Discharge Data. The 2003 data is not yet available.
2. **Section Number:** Health Systems Capacity Indicator #02
Field Name: HSC02
Row Name:
Column Name:
Year: 2005
Field Note:
Data for 2003 are not available at this time due to database switch at Virginia Department of Medical Assistance Services.
3. **Section Number:** Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2005
Field Note:
Data for 2003 are not available at this time due to database switch at Virginia Department of Medical Assistance Services.
4. **Section Number:** Health Systems Capacity Indicator #04
Field Name: HSC04
Row Name:
Column Name:
Year: 2005
Field Note:
2003 Vital Records data are not currently available. These data will be available later this year.
5. **Section Number:** Health Systems Capacity Indicator #07
Field Name: HSC07
Row Name:
Column Name:
Year: 2005
Field Note:
Data for 2003 are not available at this time due to database switch at Virginia Department of Medical Assistance Services.

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: VA

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) Percent of low birth weight (< 2,500 grams)	2002	Payment source from birth certificate	<u>9.9</u>	<u>7.4</u>	<u>8</u>
b) Infant deaths per 1,000 live births	2002	Payment source from birth certificate	<u>9.9</u>	<u>6.6</u>	<u>7.3</u>
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2002	Payment source from birth certificate	<u>72.7</u>	<u>87.9</u>	<u>84.7</u>
d) Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2002	Payment source from birth certificate	<u>70.1</u>	<u>83.7</u>	<u>80.8</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)
STATE: VA

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2003	<u>133</u>
b) Medicaid Children (Age range <u>1</u> to <u>18</u>) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2003	<u>133</u> <u> </u> <u> </u>
c) Pregnant Women	2003	<u>133</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)
STATE: VA

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) Infants (0 to 1)	2003	<u>200</u>
b) Medicaid Children (Age range <u>1</u> to <u>18</u>) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2003	<u>200</u> <u> </u> <u> </u>
c) Pregnant Women	2003	<u>200</u>

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

None

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: VA

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	No
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	1	No
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	1	No
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	1	No
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	1	No

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: VA

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	1	No
Other: Youth Tobacco Survey	2	No

HEALTH SYSTEMS CAPACITY INDICATOR #09C (Data Capacity) Overweight/Obesity
(The Ability of the State to Determine the Percent of Children Who are Obese or Overweight)

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	1	No
Pediatric Nutrition Surveillance System (PedNSS)	1	No
WIC Program Data	2	Yes
Other: 		

*Where:
1 = No
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

None

FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A
Field Name: BAD
Row Name: Annual linkage of infant birth and infant death certificates
Column Name:
Year: 2005
Field Note:
The linked data is provided on an on-going basis via a disk. The MCH program does not have direct access to the electronic database.
2. **Section Number:** Indicator 09B
Field Name: YRBSS_09B
Row Name: Youth Risk Behavior Surveillance
Column Name:
Year: 2005
Field Note:
Virginia does not participate, however some school districts use the YRBS.

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: VA

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	7.8	8.0	7.9	8.0	
Numerator	7,416	7,886	7,816	7,904	
Denominator	95,207	98,864	98,531	99,235	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	6.2	7.2	6.3	6.2	
Numerator	5,727	6,448	5,993	5,984	
Denominator	92,223	89,004	95,307	95,892	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	1.6	1.6	1.7	1.7	
Numerator	1,525	1,618	1,650	1,653	
Denominator	95,207	98,864	98,531	99,235	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	1.2	1.3	1.3	1.3	
Numerator	1,141	1,201	1,219	1,237	
Denominator	92,223	89,004	95,307	95,892	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	6.9	7.3	6.3	6.2	
Numerator	96	106	91	92	
Denominator	1,386,907	1,453,021	1,453,026	1,482,240	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	2.6	2.5	2.1	2.7	
Numerator	36	36	31	40	
Denominator	1,386,907	1,453,021	1,453,026	1,482,240	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	20.5	25.5	21.9	25.3	
Numerator	195	246	211	258	
Denominator	951,171	964,039	964,639	1,018,109	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	176.1	193.1	177.8	250.8	
Numerator	2,442	2,806	2,584	3,718	
Denominator	1,386,907	1,453,021	1,453,021	1,482,240	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	27.5	24.9	23.0	18.2	
Numerator	382	362	334	270	
Denominator	1,386,907	1,453,021	1,453,021	1,482,240	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	127.0	122.9	132.6	114.1	
Numerator	1,208	1,185	1,279	1,162	
Denominator	951,171	964,039	964,639	1,018,109	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	22.6	24.7	27.5	27.2	
Numerator	5,154	5,586	6,479	6,407	
Denominator	227,769	225,936	235,718	235,718	
Is the Data Provisional or Final?				Final	

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	1999	2000	<u>Annual Indicator Data</u>		2003
			2001	2002	
Annual Indicator	4.4	5.3	6.0	6.3	
Numerator	5,767	6,961	8,181	8,490	
Denominator	1,325,401	1,323,433	1,353,362	1,353,362	
Is the Data Provisional or Final?				Final	

FORM NOTES FOR FORM 20

None

FIELD LEVEL NOTES

None

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: VA

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2002 Is this data from a State Projection? Yes

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	101,138	69,913	23,019	88	4,386	81	3,651	
Children 1 through 4	384,200	266,021	86,697	1,011	16,172	345	13,954	
Children 5 through 9	482,120	333,820	112,878	1,686	18,774	441	14,521	
Children 10 through 14	514,770	355,623	126,007	1,805	18,798	437	12,100	
Children 15 through 19	499,873	349,871	118,655	1,871	19,194	413	9,869	
Children 20 through 24	518,154	363,683	120,472	2,114	22,565	529	8,791	
Children 0 through 24	2,500,255	1,738,931	587,728	8,575	99,889	2,246	62,886	0

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	92,729	8,409	
Children 1 through 4	354,289	29,911	
Children 5 through 9	450,224	31,896	
Children 10 through 14	486,135	28,635	
Children 15 through 19	472,866	27,007	
Children 20 through 24	477,269	40,885	
Children 0 through 24	2,333,512	166,743	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: VA

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2002 Is this data from a State Projection? No

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	169	55	110	0	0	0	4	0
Women 15 through 17	2,746	1,390	1,249	1	27	0	76	3
Women 18 through 19	6,280	3,589	2,374	13	87	1	204	12
Women 20 through 34	74,442	51,694	15,784	93	4,658	19	2,104	90
Women 35 or older	15,594	11,805	2,317	16	1,158	1	280	17
Women of all ages	99,231	68,533	21,834	123	5,930	21	2,668	122

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	148	21	0
Women 15 through 17	2,440	291	15
Women 18 through 19	5,614	644	22
Women 20 through 34	66,618	7,626	198
Women 35 or older	14,407	1,160	27
Women of all ages	89,227	9,742	262

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: VA

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2002 Is this data from a State Projection? No

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	725	380	316	2	22	0	3	2
Children 1 through 4	104	63	35	0	6	0	0	0
Children 5 through 9	64	41	22	0	1	0	0	0
Children 10 through 14	88	61	23	0	4	0	0	0
Children 15 through 19	307	198	100	1	8	0	0	0
Children 20 through 24	431	281	138	0	8	0	2	2
Children 0 through 24	1,719	1,024	634	3	49	0	5	4

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	665	50	10
Children 1 through 4	95	9	0
Children 5 through 9	61	2	1
Children 10 through 14	80	7	1
Children 15 through 19	285	20	2
Children 20 through 24	390	33	8
Children 0 through 24	1,576	121	22

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: VA

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	1,982,101	1,375,248.0	467,256.0	6,461.0	77,324.0	1,717.0	54,095.0		2002
Percent in household headed by single parent	22.0	16.0	43.0	26.0	9.0	22.0	25.0	20.0	2000
Percent in TANF (Grant) families		31.9	65.4	0.1	0.8	1.6		0.2	
Number enrolled in Medicaid	21,228	9,813.0	8,593.0	44.0	694.0	47.0		2,037.0	2003
Number enrolled in SCHIP	35,030	16,482.0	10,595.0	91.0	1,385.0	16.0		6,461.0	2003
Number living in foster home care	7,018	3,111.0	3,200.0	5.0	24.0	1.0	298.0	379.0	2003
Number enrolled in food stamp program	377,418							377,418.0	2003
Number enrolled in WIC	137,014	54,509.0	53,398.0	526.0	3,391.0			25,190.0	2003
Rate (per 100,000) of juvenile crime arrests	3,250.0								2000
Percentage of high school drop-outs (grade 9 through 12)	2.2	0.4	0.4	0	0			0.1	2002

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	1,856,243.0	125,858.0		2002
Percent in household headed by single parent				
Percent in TANF (Grant) families				
Number enrolled in Medicaid	19,191.0	1,873.0	164.0	2003
Number enrolled in SCHIP	28,569.0	5,926.0	535.0	2003
Number living in foster home care	6,639.0	342.0	37.0	2003
Number enrolled in food stamp program				
Number enrolled in WIC	114,845.0	22,169.0	3,021.0	2003
Rate (per 100,000) of juvenile crime arrests				
Percentage of high school drop-outs (grade 9 through 12)	0.9	0.1	0	2002

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: VA

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: Is this data from a State Projection? No

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	
Living in urban areas	
Living in rural areas	
Living in frontier areas	
Total - all children 0 through 19	0

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: VA

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2000 Is this data from a State Projection? No

POVERTY LEVELS	TOTAL
Total Population	6,844,372.0
Percent Below: 50% of poverty	4.3
100% of poverty	9.6
200% of poverty	24.7

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: VA

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2000 Is this data from a State Projection? No

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	1,707,909.0
Percent Below: 50% of poverty	5.5
100% of poverty	12.3
200% of poverty	31.4

FORM NOTES FOR FORM 21

None

FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A
Field Name: HSIRace_Children
Row Name: All children 0 through 19
Column Name:
Year: 2005
Field Note:
Data Source: US Census 2002 population estimates data, Welden Cooper Center, University of Virginia.
2. **Section Number:** Indicator 09A
Field Name: HSIRace_TANFPercent
Row Name: Percent in TANF (Grant) families
Column Name:
Year: 2005
Field Note:
Data Source: Virginia Department of Social Services, point-in-time data of average monthly enrollment as of May 1, 2004.
3. **Section Number:** Indicator 09A
Field Name: HSIRace_MedicaidNo
Row Name: Number enrolled in Medicaid
Column Name:
Year: 2005
Field Note:
Data Source: VAMMIS, 1/1/04, point-in-time data as of December 31, 2003 (Medicaid Expansion, Children <19). Other category includes Hispanics.
4. **Section Number:** Indicator 09A
Field Name: HSIRace_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2005
Field Note:
Data Source: VAMMIS 1/1/04, point-in-time data as of December 31, 2003. Other category includes Hispanics.
5. **Section Number:** Indicator 09A
Field Name: HSIRace_FoodStampNo
Row Name: Number enrolled in food stamp program
Column Name:
Year: 2005
Field Note:
Data Source: Virginia Department of Social Services, average monthly enrollment (all individuals) for SFY 03. Data is not enumerated by age or race.
6. **Section Number:** Indicator 09A
Field Name: HSIRace_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2005
Field Note:
Data Source: Virginia Health Department, December 2003 WIC Enrollment District and Race. Asian category also includes Pacific Islanders; Other category includes Hispanics.
7. **Section Number:** Indicator 09A
Field Name: HSIRace_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2005
Field Note:
Data Source: Virginia Department of Education, Dropouts 2002-2003, 7th - 12th grades. Asian category includes Pacific Islanders. Other Category includes Unspecified and Hispanic races.
8. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_Children
Row Name: All children 0 through 19
Column Name:
Year: 2005
Field Note:
Data Source: US Census 2002 population estimates data, Welden Cooper Center, University of Virginia.
9. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_MedicaidNo
Row Name: Number enrolled in Medicaid
Column Name:
Year: 2005
Field Note:
Data Source: VAMMIS, 1/1/04, point-in-time data as of December 31, 2003 (Medicaid Expansion, Children <19).
10. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_SCHIPNo
Row Name: Number enrolled in SCHIP
Column Name:
Year: 2005
Field Note:
Data Source: VAMMIS 1/1/04, point-in-time data as of December 31, 2003.
11. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2005
Field Note:
Data Source: Virginia Health Department, December 2003 WIC Enrollment District and Race.
12. **Section Number:** Indicator 09A

Field Name: HSIRace_FosterCare
Row Name: Number living in foster home care
Column Name:
Year: 2005
Field Note:
Data Source: Virginia Department of Social Services AFCARS FFY 2003 (as of 9/30/04). Other category includes Hispanics.

13. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_FosterCare
Row Name: Number living in foster home care
Column Name:
Year: 2005
Field Note:
Data Source: Virginia Department of Social Services AFCARS FFY 2003 (as of 9/30/04).